K093159

510(k) Summary

Date Prepared: June 9, 2010

JUN 2 4 2010

1. Owner's Name:

PruGen IP Holdings, Inc.

8711 East Pinnacle Peak Road

Suite C-201 PMB 225

Scottsdale, AZ 85255

Contact Person:

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2. **Proprietary Name:**

PRTM Cream

Common Name: Classification Name:

Dressing, Wound & Burn, Hydrogel w/ Drug or Biologic

Dressing, Wound & Burn, Hydrogel w/ Drug or Biologic

- Substantially Equivalent Devices: PruGen, Inc. believes that PR™ Cream is substantially equivalent to the following currently marketed device: Tetrix® Cream cleared under K071483.
- Device Description: PRTM cream is a non-sterile cream formulation intended for topical use only. It is presented for Prescription (requiring a physician diagnosis disease state) use. PRTM cream is for topical dermatologic use only. PRTM cream is applied in a thin layer to affected areas 2-3 times per day or as directed by a physician.

PRTM cream is a nonsteroidal cream comprised of aluminum magnesium hydroxide stearate, cetyl dimethicone copolyol, cyclomethicone, dimethicone, hexyl laurate, polyglyceryl-4-isostearate, purified water, and sodium chloride. Contains phenoxyethanol and propylparaben as preservatives.

- **Intended Use of the Device:** PR[™] cream is indicated to manage various types of dermatoses, 5. including atopic dermatitis, allergic contact dermatitis and irritant contact dermatitis. PRTM cream helps to relieve dry, waxy skin by maintaining a moist wound and skin environment, which is beneficial to the healing process.
- Summary of Technical Characteristics of Device compared to Predicate Devices: The referenced predicate device is also a non-sterile cream that is applied to relieve the symptoms of various dermatoses.
- Conclusions: Functional and performance testing has been conducted to assess the safety and efficacy of PR Cream TM Cream and results are satisfactory.







Food and Drug Administration 10903 New Hampshire Avenue Document Control Room –WO66-G609 Silver Spring, MD 20993-0002

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Prugen IP Holdings, Inc. % Robert L. Knechtel, M.D. EVP and General Counsel 8711 East Pinnacle Peak Road Suite C201, PMB 225 Scottsdale, Arizona 85255

Re: K093159

Trade/Device Name: PR[™] Cream

Product Code: FRO Dated: April 15, 2010 Received: April 16, 2010

Dear Dr. Knechtel:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set

Page 2 - Robert L. Knechtel, M.D.

forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to

http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm.

Sincerely yours,

Mark N. Melkerson

Director

Division of Surgical, Orthopedic and Restorative Devices Office of Device Evaluation Center for Devices and Radiological Health

Enclosure

INDICATIONS FOR USE

Device Trade Name: PRTM Cream

510(k) number: K093159

FOR TOPICAL DERMATOLOGICAL USE ONLY

Description Rx Product:

PRTM cream is a non-sterile cream formulation intended for prescription use only.

INDICATIONS AND USAGE:

PRTM cream is indicated to manage various types of dermatoses, including atopic dermatitis, allergic contact dermatitis and irritant contact dermatitis. PRTM cream helps to relieve dry, waxy skin by maintaining a moist wound and skin environment, which is beneficial to the healing process.

Prescription Use X
(Part 21 CFR 801 Subpart D)

AND/OR

Over-The-Counter Use _____(21 CFR 801 Subpart C)

(Division Sign-Off)

Division of Surgical, Orthopedic,

and Restorative Devices

510(k) Number

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